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APPLICANTS Francesco Serino, Rome, ITALY; Mauro Ferrari, Pisa, ITALY;				
** CONTINUING DATA *****				
** FOREIGN APPLICATIONS ***** ITALY RM2002A000596 11/27/2002				
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 03/03/2004				
Foreign Priority claimed: <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged		STATE OR COUNTRY ITALY	SHEETS DRAWING 6	TOTAL CLAIMS 42
Examiner's Signature _____ Initials _____		INDEPENDENT CLAIMS 12		
ADDRESS 27316				
TITLE VASCULAR PROSTHESIS FOR THE TREATMENT OF ABDOMINAL AORTIC ANEURYSMS, USING A COMBINED LAPAROSCOPIC/ OPEN AND ENDOVASCULAR TECHNIQUE, AND DELIVERY SYSTEM FOR RELEASING A PROSTHESIS FITTED WITH ANCHORING STENTS				
FILING FEE RECEIVED 1270	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	